

Senate Bill 3 Preserve Telehealth Access Act of 2021

and

Senate Bill 393 Maryland Medical Assistance Program and Health Insurance – Coverage and Reimbursement of Telehealth Services

Finance Committee

January 27, 2021

Position: SUPPORT

The Mental Health Association of Maryland is a nonprofit education and advocacy organization that brings together consumers, families, clinicians, advocates and concerned citizens for unified action in all aspects of mental health, mental illness and substance use. We appreciate this opportunity to present this testimony in support of Senate Bill 3 and Senate Bill 393.

Expanded use of telehealth has been a critical component in Maryland's effort to mitigate spread of the coronavirus. Increased flexibility in the delivery of these services has protected providers and patients from exposure to the virus, ensured continuity of care for Marylanders unable to access in-person treatment, and increased overall access to care. The service expansion has become a vital part of Maryland's continuum of care and it must be preserved.

The increased access to care that telehealth allows will be particularly important as Maryland works to address the serious behavioral health impact of COVID-19. Isolation, loss of income and grief resulting from the loss of a loved one – not to mention the threat of actually contracting the virus – are all having a profound effect on our mental health. Up to 40% of Marylanders have reported feeling anxious or depressed as a result of the pandemic and state crisis hotlines are receiving a startling increase in calls from individuals at risk for suicide. Drug-and-alcohol-related deaths jumped by more than 18% in the second quarter of 2020 as compared to the same period a year earlier, including a 30% increase in opioid-related deaths. If we expect to meet this increased demand, SB 3 and SB 393 are essential.

The bills are similar in several ways:

- Both expand access to audio-only telehealth in Medicaid and commercial health plans. This is an important health equity issue. Low-income families without access to the internet or smartphones and families living in rural communities with poor broadband service are unable to access audio-visual telehealth services.
- Both prohibit Medicaid from limiting the delivery of telehealth based on the location of the recipient. This is particularly important for Marylanders experiencing homelessness and for individuals who may not feel safe accessing behavioral health treatment in their home.
- Both require commercial health plans to reimburse providers for telehealth services at the same rate as in-person care.

However, SB 393 includes some very important additional provisions:

- It authorizes reimbursement of behavioral health programs for telehealth services delivered by peers and paraprofessionals – two critical sectors of the behavioral health workforce.
- It protects consumer choice, ensuring that a patient may not be required to use telehealth in lieu of an in-person visit.
- It extends reimbursement parity to telehealth services provide in the Medicaid program.

Telehealth is a critical tool in our efforts to meet an increasing demand for mental health and substance use treatment. For this reason, **MHAMD supports the expanded telehealth provisions covered in both bills, and the additional measures included in SB 393.**

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